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DEGI ADATE			Attorney	Docket Number			OMB control number.	
DECLARATIO		LITY OR			PES ()01		
	ESIGN		Liner Mai	ned Inventor	Jim E	dwards	•	
PATENT APPLICATION			COMPLETE IF KNOWN					
(37	CFR 1.63)		Applicati	on Number	T	12/13	_ <u></u>	
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Each inventor's residence, i	nalling address,	and citizenship are	as stated	helow next to t	hois nome			
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I believe the inventor(s) nan which a patent is sought on	the invention er	the original and first	Inventor	(s) of the subjec	t matter w	hich is clain	ned and for	
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the specification of which		(Title of the	Invention)				
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is attached hereto								
OR								
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was filed on (MM/DD/	YYYY)		as Un	ited States App	lication N	umber or PC	'T international	
Application at a				_			** uncontadorias	
Application Number		and was amended	on (MM/	(יייייאפס		1	(if applicable).	
I hereby state that I have rev	iewed and unde	referred the contents	of the elv	l co belitachi av	ooificatio		the state	
I hereby state that I have reviewed and understand the contants of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
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Prior Foreign Application Number(s)		Foreign Filing	Date	Priorit	y	Certified C	opy Attached?	
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This collection of information is required by 3S U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) en application. Confidentiality is governed by 3S U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS YO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.



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DECLARATION — Utility or Design Patent Application

							
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Country	Telephone		T	Fax			
	(206) 274-280)	I	(206) 2	274-	2801	
I hereby declare that all statements made he and belief are believed to be true; and fur	reio of my own lo	oudadaa.					
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	the application of	any pate	nt issue	d therec	on.		·
NAME OF SOLE OR FIRST INVENTOR:							
Given Name		A petition i	nas bee	n filed fo	or thi	s unsig	ned Inventor
(first and middle [if any]) Jim				mily Na Sumam		Edwa	rde
Inventor's						Luwa	103
Signature ()	Λ						Date
- Chi	2-						
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City State			ZIP		-		Carala
Jefferson 6	Α			05	40	2	Country US A
				<u> </u>	7 -		USA
NAME OF SECOND INVENTOR:			A petit	ion has	beer	n filed f	or this unsigned inventor
Given Name (first and middle [if any]) Darren				ily Nam		•	
			or St	umame	W	/attles	•
Inventor's			-			. 1	Date
Signature Law Hatte							Date
Residence: City State		Countr	~			Citizen	ehin
Gainsville Geor	raia	1	ISA		- 1		•
Mailing Address	N.W.		<u>~~</u>		Ш.		ISA.
3840 Leach Road							
City State		7	IP			Countr	,
Gainsville GA		- 1	•				
quinsville GA	0	:	30	50(0	ι	ASA
Additional inventors or a legal representative are being named on the supplemental sheat(s) PTO/SB/02A or 02LR stracted hereto.							

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ADDITIONAL INVENTOR(S)
Supplemental Sheet Under the Paperwork Reduction Act of 1995, no persons are required to resp **DECLARATION** Supplemental Sheet Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any) Family Name or Surname Jim Tomlin Inventor's Signature Date Residence: City State GA USA Citizenship Mailing Address 908854 Mailing Address Box Gainsville GA 30501 Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any) Family Name or Surname Signature Residence: City State Country Citizenship Mailing Address Mailing Address City State Ζip Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any) Family Name or Sumame Inventor's Signature Date Residence: City State Country Citizenship Mailing Address

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Are comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sant to the Chief Information Officer, TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Mailing Address

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention					
As the below named inventor(s), I/we declare that:					
This declaration is di	rected to:	*			
	The attached application, or				
	Application No.	filed on			
	as amended on				
I/we believe that I/we sought;	am/are the original and first inventor(s) of the	subject matter which is claimed and for which a patent is			
If we have reviewed and understand the contents of the above-identified application, including the claims; as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which continuation-in-part application.					
All statements made herein of mylown knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are putentshable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVE	NTOR(S)				
Inventor one: _Jim E					
Signature:	Citizen of:	USA			
nventor two: Darre					
Signature:	Cilizen of:	LISA			
nventor three:Jim -					
Signature:	Citizen of:	USA .			
nventor four:	·				
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Additional Invento	rs or a legal representative are being named on	additional form(s) attached hereto.			

complete, including gathering, preparing, and submitting the completed application from the upper O. Time will vary depending upon the individual case. Any U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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